### **APPLICATION DATA SHEET**

**Application Information** 

Application Number:: Not yet assigned

Filing Date:: July 17, 2003

Application Type:: Regular

Subject Matter:: Utility

Suggested Classification::

Suggested Group Art Unit::

CD-ROM or CD-R:: None

Number of CD Disks::

Number of Copies of CDs::

Sequence Submission?::

Computer Readable Form (CRF)?::

Number of Copies of CRF::

Title Line One:: INSURANCE INFORMATION MANAGEMENT

SYSTEM AND METHOD

Title Line Two::

Attorney Docket Number:: 52493.000343

Request for Early Publication?:: No

Request for Non-Publication?:: No

Suggested Drawing Figure:: 34

Total Drawing Sheets:: 33

Small Entity?:: No

Petition Included?:: No

Petition Type::

Licensed US Government Agency:: No

Contract or Grant Numbers::

Secrecy Order in Parent Application?:: No

**Applicant Information** 

Applicant One Authority Type::

Inventor

Primary Citizenship::

USA

Country::

Status::

Full Capacity

Applicant One Given Name::

David

Middle Name::

Family Name::

**HANSON** 

Name Suffix::

City of Residence::

San Rafael

State or Province of Residence::

California

Country of Residence::

**United States** 

Street of Mailing Address Line One::

1650 Los Gamos Drive

City of Mailing Address::

San Rafael

State or Province of Mailing Address::

California

Country of Mailing Address::

USA

Postal or Zip Code::

94903

Applicant Two Authority Type::

Inventor

Primary Citizenship::

**United States** 

Country::

Status::

**Full Capacity** 

Applicant Two Given Name::

Terry

Middle Name::

Family Name::

**CADIGAN** 

Name Suffix::

City of Residence::

Rohnert Park

State or Province of Residence::

California

Country of Residence::

**United States** 

Street of Mailing Address Line One::

1537 Marlin Place

City of Mailing Address::

Rohnert Park

State or Province of Mailing Address:: California

Country of Mailing Address:

USA

Postal or Zip Code::

94928

Applicant Three Authority Type::

Inventor

Primary Citizenship::

**United States** 

Country::

Status::

**Full Capacity** 

Applicant Three Given Name::

Eugene

Middle Name::

Family Name::

**MANNACIO** 

Name Suffix::

City of Residence::

Novato

State or Province of Residence::

California

Country of Residence::

**USA** 

Street of Mailing Address Line One::

428 Alameda De La Loma

City of Mailing Address::

Novato

State or Province of Mailing Address::

California

Country of Mailing Address::

**USA** 

Postal or Zip Code::

94949

Applicant Four Authority Type::

Inventor

Primary Citizenship::

**United States** 

Country::

Status::

**Full Capacity** 

Applicant Four Given Name::

Perry

Middle Name::

Family Name::

**ALLEN** 

Name Suffix::

City of Residence::

Novato

State or Province of Residence::

California

Country of Residence::

**USA** 

Street of Mailing Address Line One::

1281-F Valley Oak Court

City of Mailing Address::

Novato

State or Province of Mailing Address::

California

Country of Mailing Address:

**United States** 

Postal or Zip Code::

94947

Applicant Five Given Name::

Roger

Middle Name::

Family Name::

**DESJARDINS** 

Name Suffix::

City of Residence::

North Andover

State or Province of Residence::

Massachusetts

Country of Residence::

USA

Street of Mailing Address Line One::

194 Raleigh Tavern Lane

City of Mailing Address::

North Andover

State or Province of Mailing Address::

Massachusetts

Country of Mailing Address:

**United States** 

Postal or Zip Code::

01845

Applicant Six Given Name::

Gerri

Middle Name::

Family Name::

**CHISHOLM** 

Name Suffix::

City of Residence::

Novato

State or Province of Residence::

California

Country of Residence::

USA

Street of Mailing Address Line One:: 5 Meadowlark Court

City of Mailing Address:: Novato

State or Province of Mailing Address:: California

Country of Mailing Address: United States

Postal or Zip Code:: 94947

Applicant Seven Given Name:: Madge

Middle Name::

Family Name:: GRAHN

Name Suffix::

City of Residence:: San Rafael

State or Province of Residence:: California

Country of Residence:: USA

Street of Mailing Address Line One:: 120 Solano Street

City of Mailing Address:: San Rafael

State or Province of Mailing Address:: California

Country of Mailing Address: United States

Postal or Zip Code:: 94901

**Correspondence Information** 

Correspondence Customer No.:: 21967

Name:: Hunton & Williams

Street of Mailing Address Line One:: 1900 K Street, N.W.

Street of Mailing Address Line Two:: Suite 1200

City of Mailing Address: Washington

State or Province of Mailing Address:: D.C.

Country of Mailing Address:: USA

Postal or Zip Code:: 20006

Telephone Number:: (202) 955-1500

Facsimile Number:: (202) 778-2201

E-Mail Address:: jlink@hunton.com

# Representativ Information

Representative Customer Number::

21967

# **Domestic Priority Information**

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	Continuation of	10/279,863	October 25, 2002
10/279,863	Continuation of	10/028,964	December 27, 2001
10/028,964	Non-Provisional of	60/280,146	April 2, 2001

# **Foreign Priority Information**

Country:	Application Number::	Filing Date::	Priority Claimed::

### **Assignee Information**

Assignee Name::

Street of Mailing Address Line One::

Street of Mailing Address Line Two::

City of Mailing Address::

State of Province of Mailing Address::

Country of Mailing Address::

Postal or Zip Code::

021421